Image# 13941286145 PAGE 1 / 10

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Use (	Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		nple: If typir the lines.	ng, type	12FE4M5	5	
AMERICAN SOCIETY FOR O	CLINICAL LABOR	ATORY SCIEN	CE POLITI	CAL ACTIO	N COMMIT	TEE (FKA	ASMT/PAC)
ADDRESS (number and street)	1861 International [	Orive					
Check if different	#200						
than previously reported. (ACC)	Tysons Corner				VA	22102	
2. FEC IDENTIFICATION NUI	MBER ▼	CITY ▲		Ş	STATE A	ZII	P CODE A
C C00034645		3. IS THIS REPORT	\ \ \	IEW N) <b>OR</b>	AI (A	MENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)		lun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15	,	Apr 20 (M4)		lul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)
Quarterly Report (Q1  July 15  Quarterly Report (Q2	(C) 12-Day		Primary (12P	)	General	(12G)	Runoff (12R)
October 15	Report fo	or the:	Convention (	12C)	Special	(12S)	
Quarterly Report (Q3  January 31  Year-End Report (YE		Election on	M = M /	D   D /	Y	""	the tate of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day		General (30G	3)	Runoff (	30R)	Special (30S)
Termination Report (TER)	Report fo	Election on	M = M /	D D /	Y " Y " Y " Y		the tate of
5. Covering Period 01	/ D D / Y	2013	through	M M M	30	2013	Y
certify that I have examined this	Report and to the	best of my know	rledge and b	pelief it is tru	e, correct ar	nd complete.	
Type or Print Name of Treasurer	Diane Evans						
Signature of Treasurer Diane	Evans		Electronically	Filed] D	ate 07	M / 30	2013
NOTE: Submission of false, erroned	ous, or incomplete in	formation may sub	oject the pers	son signing th	is Report to	the penalties	of 2 U.S.C. §437g.
Office Use Only							FORM 3X 12/2004

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE POLITICAL ACTION COMMITTEE (FKA ASMT/PAC)

01 06 30 Report Covering the Period: 2013 2013 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 44159.20 January 1, 2013 (b) Cash on Hand at 44159.20 Beginning of Reporting Period..... 8537.96 8537.96 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 52697.16 52697.16 6(a) and 6(c) for Column B)..... 14527.48 14527.48 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 38169.68 38169.68 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE POLITICAL ACTION COMMITTEE (FKA ASMT/PAC)

I. Receipts	I. Receipts COLUMN A Total This Period		
. Contributions (other than loans) From:			
(a) Individuals/Persons Other			
Than Political Committees	225.00	225.00	
(i) Itemized (use Schedule A)	7 7 7	7 7	
(ii) Unitemized	8257.00	8257.00	
(iii) TOTAL (add			
Lines 11(a)(i) and (ii)▶	8482.00	8482.00	
	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contributions (add Lines		7 7	
11(a)(iii), (b), and (c)) (Carry			
Totals to Line 33, page 5)▶	8482.00	8482.00	
2. Transfers From Affiliated/Other			
Party Committees	0.00	0.00	
3. All Loans Received	0.00	0.00	
. All Loans Heceived			
Loan Repayments Received	0.00	0.00	
5. Offsets To Operating Expenditures		7	
(Refunds, Rebates, etc.)			
(Carry Totals to Line 37, page 5)	0.00	0.00	
6. Refunds of Contributions Made			
to Federal Candidates and Other		0.00	
Political Committees	0.00	0.00	
Other Federal Receipts     (Dividends, Interest, etc.)	55.96	55.96	
3. Transfers from Non-Federal and Levin Funds	33.90	33.30	
(a) Non-Federal Account			
(from Schedule H3)	0.00	0.00	
(b) Levin Funds (from Schedule H5)	0.00	0.00	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00	
<ul><li>Total Receipts (add Lines 11(d),</li><li>12, 13, 14, 15, 16, 17, and 18(c))</li></ul>	8537.96	8537.9	
		7	
. Total Federal Receipts			
(subtract Line 18(c) from Line 19)▶	8537.96	8537.96	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period		
	perating Expenditures:  Allocated Federal/Non-Federal  Activity (from Schedule H4)		Calendar Year-to-Date	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
(b)				
	Expenditures	12477.48	12477.48	
(c)	Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	12477.48	12477.48	
22. Tra	ansfers to Affiliated/Other Party			
	ommitteesontributions to	0.00	0.00	
Fe an	deral Candidates/Committees d Other Political Committees	2000.00	2000.00	
	dependent Expenditures	0.00	0.00	
25. CC	se Schedule E)oordinated Party Expenditures			
(2 (u:	U.S.C. §441a(d)) se Schedule F)	0.00	0.00	
26. Lo	an Repayments Made	0.00	0.00	
27. Lo	ans Made	0.00	0.00	
28. Re (a)	efunds of Contributions To: Individuals/Persons Other Than Political Committees	50.00	50.00	
(b)		0.00	0.00	
(c)	(such as PACs)	0.00	0.00	
(d)	) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))▶	50.00	50.00	
29. Ot	her Disbursements	0.00	0.00	
	ederal Election Activity (2 U.S.C. §431(20))			
(a)	) Allocated Federal Election Activity (from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	i	0.00	0.00	
(h)	(ii) "Levin" Share	0.00	0.00	
(0)	) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c)	• 1	0.00	0.00	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
	tal Disbursements (add Lines 21(c), 22,			
23	s, 24, 25, 26, 27, 28(d), 29 and 30(c))	14527.48	14527.48	
	tal Federal Disbursements			
(SI	ubtract Line 21(a)(ii) and Line 30(a)(ii) om Line 31)	14527.48	14527.48	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	8482.00	8482.00	
4. Total Contribution Refunds (from Line 28(d))	50.00	50.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8432.00	8432.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	12477.48	12477.48	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
3. Net Operating Expenditures (subtract Line 37 from Line 36)	12477.48	12477.48	

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LIN			:	PAGE	6 (	)F	10
(check o	nly on	e)					
<b>X</b> 11a		11b		11c	12		
13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY FOR CLINICAL I	ABORATORY SCIENCE POLITICAL AC	TION COMMITTEE (FKA ASMT/PAC)
١.	Full Name (Last, First, Middle Initial) Roxanne Alter		Date of Receipt
	Mailing Address 16023 Nottingham Drive		04 17 2013
	City Omaha	State Zip Code NE 68118	Transaction ID : SA11AI.6170
	FEC ID number of contributing		Amount of Each Receipt this Period
	federal political committee.	C	225.00
	Name of Employer	Occupation	
	Univ of Nebraska Med Center Receipt For:	Research Coordinator	
	Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00	
3.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address		M M / D D / Y Y Y Y Y
	City	State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	
	Name of Employer	Occupation	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
 >.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address		M = M / D = D / Y = Y = Y
	City	State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	The same of East Hooding and Forest
	Name of Employer	Occupation	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	7 7 7	
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	225.00
Т	OTAL This Period (last page this line number of	only)	225.00

### S ľ

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 7 OF 10
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b	22 23	24 25 26
		27	28a 28b	28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)  AMERICAN SOCIETY FOR CLINICAL LABO	ORATORY SCIENCE P	OLITICAL AC	TION COMMITTEE	(FKA ASMT/PAC)
Full Name (Last, First, Middle Initial)				
A. American Society for Clinical Labora	atory Science		Date of Disbursemen	/ Y Y Y Y Y
Mailing Address 1861 International Drive #200			04 01	2013
•	tate Zip Code VA 22102		Transaction ID : S	B21B.6162
Purpose of Disbursement Sponsorship of Association Legislative Day			Amount of Each Dis	bursement this Period
Candidate Name		Category/	Amount of Each bis	
		Type		10000.00
	ent For:  Primary General  Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)  B. American Society for Clinical Labor	atory Science		Date of Disbursemen	nt
Mailing Address 1861 International Drive #200			04 19	2013
Tysons Corner	tate Zip Code VA 22102		Transaction ID : S	B21B.6169
Purpose of Disbursement Conference Call Fees			Amount of Each Dis	bursement this Period
Candidate Name		Category/ Type		21.59
	ent For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)  C. Evans & Katz, LLC			Date of Disbursemen	nt
Mailing Address 1831 Bay Street SE			01 15	2013
,	tate Zip Code DC 20003		Transaction ID : S	B21B.6078
Purpose of Disbursement Accounting Services				
Candidate Name		Category/ Type	Amount of Each Dis	bursement this Period 332.00
	ent For: Primary General Other (specify) ▼			,
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)			5	10353.59

S	SCHEDULE B (FEC Form 3X)				LINE NUMBER: PAGE 8 OF 10								
	EMIZED DISBURSEMENTS		arate schedule(s)			k only o	_						J. 10
. 1			category of the Summary Page	1		21b [	22		23		24	25	26
		Dotalled				27	28a		28b		28c	29	30k
	y information copied from such Reports and Stater												
or	for commercial purposes, other than using the name	ne and addi	ress of any politic	al con	nmit	ttee to s	solicit co	ntrib	utions	froi	m such c	ommit	tee.
$  \setminus $	NAME OF COMMITTEE (In Full)	004700	V 0015N05 D	<del></del> .	<b>.</b> .						/=I/A A	<b>0. 4 -</b> 1	- 1 O
]/	AMERICAN SOCIETY FOR CLINICAL LAB	ORATOR	Y SCIENCE PO	JLIII	CA	LACI	ION CC	יוואוכ	VIIII	ΕE	(FKA A	SM1/	PAC)
_	Full Name (Last, First, Middle Initial)									—			
Α.	Evans & Katz, LLC						Date of	f Dis	sburse	emer	nt		
							M M	1	D	D	/ Y	Y	Υ
	Mailing Address 1831 Bay Street SE						04	ш	0	1	2	2013	
	City	State	Zip Code										
	Washington	DC	20003				Trans	acti	ion ID	: SF	B21B.616	61	
	Purpose of Disbursement			-		_							
	Accounting Services						Amoun	t of	Each	Dish	bursemen	nt this	Period
	Candidate Name			Cate	egor	ry/			-			13	3.16
	0//			T	ype			-	7	_		13.	5.10
	Office Sought: House Disburser Senate	nent For: Primary	General										
	President	Other (spe											
	State: District:	C (Op 0	oy) <b>\</b>										
	Full Name (Last, First, Middle Initial)												
В.	Evans & Katz, LLC						Date of	f Dis	sburse	mer	nt		
	<u> </u>						M = M	1	D	D		Y	Υ
	Mailing Address 1831 Bay Street SE						06		0	)3	2	2013	
	City	State	Zip Code										
	Washington	DC	20003				Trans	sacti	ion ID	: SI	B21B.640	)2	
	Purpose of Disbursement					$\overline{}$							
	Accounting Services						Amoun	t of	Each	Dist	bursemen	nt this	Period
	Candidate Name			Cate			Г.					123	2.24
	Office Sought: House Disburser	nent For:		17	ype			_	7		7		
	Senate Disburser	Primary	General										
	President	Other (spec											
	State: District:												
Т	Full Name (Last, First, Middle Initial)												
C.	Renee Setina						Date of	f Dis	sburse	mer	nt		
	Mailing Address 0507 W. J. D. J. J. D.						M M	1		D		Y   Y	Υ
	Mailing Address 3537 West Beechwood Place						02	٠.		28		2013	_
	City	State	Zip Code				<b>T</b>						
	Springfield	МО	65807				Trans	sacti	ion ID	: 51	B21B.608	59	
	Purpose of Disbursement Reimb Gifts for Supporters				_								
	Candidate Name						Amoun	t of	Each	Dist	bursemen	nt this	Period
	Candidate Name			Cate	egor ype							69	0.00
	Office Sought: House Disburser	nent For:		1	, PC			-	7	_	7		
	Senate	Primary	General										
	President	Other (spe	cify) 🔻										
	State: District:												
								-	-			2051	40
S	UBTOTAL of Disbursements This Page (optional)					· <b>•</b>		-	7			205	o.4U
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 9 OF						
•	Use separate schedule(s)	FOR LINE (check only	NOMBET.					
ITEMIZED DISBURSEMENTS	for each category of the	X 21b						
	Detailed Summary Page	27	28a 28b 28c 29 30					
Г								
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
AMERICAN SOCIETY FOR CLINICAL LAB	ORATORY SCIENCE PO	OLITICAL AC	TION COMMITTEE (FKA ASMT/PAC)					
Full Name (Last, First, Middle Initial)	ne (Last, First, Middle Initial)							
A. Pin Depot Network			Date of Disbursement					
Mailing Address 2200 Winter Springs Blvd Ste 106-322			02 28 2013					
,	State Zip Code		Transaction ID : SB21B.6089.0					
Oviedo	FL 32765		1141104041011 12 1 022121000010					
Purpose of Disbursement Gifts for Supporters			Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	690.00					
Office Sought: House Disbursen	nent For:		[MEMO ITEM]					
	Primary General Other (specify) ▼		[=					
State: District:	<b>Canon</b> (opcomy) <b>▼</b>							
Full Name (Last, First, Middle Initial)								
В.			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address								
City	State Zip Code							
Purpose of Disbursement								
		1	Amount of Each Disbursement this Period					
Candidate Name		Category/						
		Туре						
Office Sought: House Disbursen								
	Primary General							
	Other (specify) ▼							
State: District:								
Full Name (Last, First, Middle Initial)  C.			Date of Disbursement					
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Mailing Address			M M / D D / Y Y Y Y					
City	State Zip Code							
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Purpose of Disbursement								
O. d'Asta Nama			Amount of Each Disbursement this Period					
Candidate Name		Category/						
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Office Sought: House Disbursen Senate								
State: District:	Other (specify) ▼							
Side. District.								
CURTOTAL of Diphyroamenta This Barra (antismal)			0.00					
SUBTOTAL of Disbursements This Page (optional)		·····	3.00					
TOTAL This Period (last page this line number only)			12408.99					

SCHEDULE B (FEC Form 3X)	Illan annametr selved to	, FOR LINE	NUMBER: PAGE 10 OF 10
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	Official of the	7 one) 22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)  AMERICAN SOCIETY FOR CLINICAL LAB	•		
Full Name (Last, First, Middle Initial)  A. DR. RAUL RUIZ FOR CONGRESS	3		Date of Disbursement
Mailing Address PO BOX 6116			04 17 2013
LA QUINTA	State Zip Code CA 92248		Transaction ID: SB23.6167
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name DR. RAUL RUIZ		Category/ Type	1000.00
Senate President	nent For: 2014  Primary General  Other (specify)		
State: CA District: 36  Full Name (Last, First, Middle Initial)  B. RE-ELECT MCGOVERN COMMIT  Mailing Address PO BOX 60405	TEE		Date of Disbursement  O2
City S WORCESTER	State Zip Code MA 01606		Transaction ID : SB23.6086
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name JIM MCGOVERN		Category/ Type	1000.00
Senate	nent For: 2014 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y
City	State Zip Code		
Purpose of Disbursement			Amount of Each Dichursement this Device
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)	71.2	
SUBTOTAL of Disbursements This Page (optional)			2000.00